CENTER FOR DISEASE CONTROL

# Morbialty and Mortality

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WEEKLY REPORT

For Week Ending March 6, 1971

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE / PUBLIC HEALTH SERVICE PHEALTH SERVICES AND MENTAL HEALTH ADMINISTRATION

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# EPIDEMIOLOGIC NOTES AND REPORTS ONCHOCERCIASIS — Washington, D.C.

In January 1971, two unrelated cases of onchocerciasis were reported in Washington, D.C. The case reports are summarized below.

Case 1: On Jan. 13, 1971, a 36-year-old American geologist was admitted to a local hospital with indurated macules on a swollen right shoulder. His right hand and fingers were also swollen and red, but there was no warmth or tenderness. No rash or subcutaneous nodules were present, and there was no lymphangitis. His white blood cell count was 5,521 with 36 percent eosinophils. The patient's stool and duodenal contents contained no ova or parasites. The intradermal test using *Dirofilaria immitis* as the antigen was positive, as was the serologic indirect hemagglutination (IHA) test for filariasis at 1:640. Day and night examinations of Knott's blood con-

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centrations\* were repeatedly negative for microfilariae. A skin snip from his right shoulder was also negative; however, a punch skin biopsy from the shoulder revealed a few *Onchocerca volvulus* microfilariae. The patient was treated with 100 mg of diethylcarbamazine which within 1 hour provoked a marked exacerbation of the right upper extremity swelling and a generalized pruritic maculopapular eruption. These reactions lasted 3 days; the dose of diethylcarbamazine was (Continued on page 74)

TABLE I. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES (Cumulative totals include revised and delayed reports through previous weeks)

	9th WE	EK ENDED		CUMULATIVE, FIRST 9 WEEKS			
DISEASE	March 6, 1971	March 7, 1970	MEDIAN 1966 - 1970	1971	1970	MEDIAN 1966 - 1970	
Aseptic meningitis	63	25	29	500	257	257	
Brucellosis	2	5	5	12	21	21	
Diphtheria	6	15	2	36	78	25	
Encephalitis, primary:							
Arthropod-borne & unspecified	19	21	19	196	179	179	
Encephalitis, post-infectious	5	8	13	54	64	73	
Hepatitis, serum	152	112	57	1,466	1,087	579	
Hepatitis, infectious	1,228	1,237	822	11,113	9,834	7,225	
Malaria	39	80	59	634	603	411	
Measles (rubeola)	2,048	1,348	1,348	14,350	9,011	9,011	
Meningococcal infections, total	76	83	83	535	621	717	
Civilian	57	62	62	472	576	659	
Military	19	21	13	63	45	46	
Mumps	4,229	2,704		29,787	22,613		
Poliomyelitis, total		_		3	1	2	
Paralytic		_	_	2	1	1	
Rubella (German measles)	1,529	1,922	1,209	8,576	11,145	7,400	
Tetanus	2	2	2	10	11	16	
Tularemia	1	_	11, -1, 111	19	11	20	
Typhoid fever	7	4	4	48	41	41	
Typhus, tick-borne (Rky. Mt. spotted fever) .		_		3	_	3	
Rabies in animals	75	86	86	654	555	646	

# TABLE II. NOTIFIABLE DISEASES OF LOW FREQUENCY

	Cum.		Cum.
Botulism:	26 6	Psittacosis: Rabies in Man: Rubella congenital syndrome: Trichinosis: Conn3. Typhus, murine:	- 5 18

# ONCHOCERCIASIS - (Continued from front page)

then progressively increased up to 600 mg per day for 3 weeks.

From December 1966 to April 1969, the patient had worked in Liberia, West Africa, where he reported having been bitten by *Simulium* flies. From July 1969 to December 1970, he had worked in Goiás State, Brazil. In October 1970, his right shoulder, arm, and hand began to swell. Intermittently associated with this were pruritic "broad white bumps resembling mosquito bites" on the shoulder and upper arm. The patient believes he was bitten by *Simulium* flies in Brazil, more so than in Liberia. He returned to Washington, D.C., on Jan. 7, 1971.

Case 2: On Jan. 11, 1971, a 33-year-old U.S. Foreign Service nurse was admitted to the same hospital as Case 1 with a pruritic papular eruption on the right buttock and thigh. She had 14 percent eosinophils, a positive *Dirofilaria immitis* skin test, and filariasis IHA positive at 1:160. Day and night examinations of Knott's blood concentrations were consistently negative for microfilariae, as were skin snips from the involved areas. Stool and duodenal contents were negative for ova or parasites. There were no subcutaneous nodules, and a punch skin biopsy revealed no microfilariae.

The patient had been stationed in Yaounde, Cameroon, West Africa, from December 1968 to December 1970. Her symptoms first developed in November 1970. Because of her

clinical symptoms, residence in an endemic area, the otherwise unexplained eosinophilia, and the positive skin test and serology for filariasis, a clinical diagnosis of onchocerciasis was made. She was treated with 50 mg of diethylcarbamazine, and within 1 hour edema of the right leg and a generalized pruritic maculopapular eruption developed. These reactions subsided after 3 days, and she was continued on diethylcarbamazine for 3 weeks, with increasing doses up to 450 mg per day.

(Reported by Health Services Administration, Department of Human Resources, District of Columbia; Martin S. Wolfe, M.D., Specialist in Tropical Medicine, Office of Medical Services, Department of State, Washington, D.C.; Daniel H. Connor, M.D., and Ronald C. Neafie, M.S., Geographic Pathology Section, Armed Forces Institute of Pathology, Washington, D.C.)

#### **Editorial Note:**

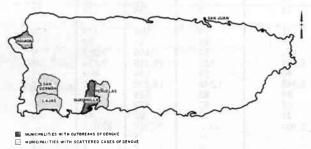
The drug suramin was not used in the treatment of either patient, despite its proven ability to kill adult *Onchocerca*. It was not used because of its potentially severe toxicity, and because both patients' infections were relatively mild. Should symptoms recur in either patient, diethylcarbamazine will be used again before considering the use of suramin.

\*This method uses a mixture of 2 ml of whole blood and 10 ml of 2 percent formalin. This solution is centrifuged and decanted. The sediment is then stained and microscopically examined for microfilariae.

# DENGUE - Puerto Rico, 1970

There were no confirmed cases of dengue in Puerto Rico in the first half of 1970, but two outbreaks and some scattered cases of dengue have been diagnosed clinically and confirmed serologically since August 1970 (Figure 1).

# Figure 1 GEOGRAPHIC DISTRIBUTION OF REPORTED DENGUE CASES PUERTO RICO — 1970



An outbreak of dengue occurred between August and October in Aguada, a small town in the northwestern corner of Puerto Rico. Sixty-seven cases were officially reported, though an estimated 200-400 may actually have occurred. Most of the patients lived in two remote, rugged, sparsely populated barrios (communities) that were not affected in the 1969 island-wide dengue epidemic. Examination of paired sera from Aguada showed confirmatory rises in hemagglutination inhibiting and/or complement fixing antibody titers. A strain of dengue type 2 virus was isolated from one patient.

Late in September 1970, an outbreak of dengue began in Guayanilla, a town in southern Puerto Rico. The outbreak was largely confined to the town itself and a nearby community. Only six cases were reported, but the disease was diagnosed correctly only as the outbreak was ending in late December. As many as several hundred cases may have occurred. The diagnosis was confirmed serologically, and antibody responses were consistent with dengue type 2 infections.

Scattered cases were serologically confirmed in three towns in southwestern Puerto Rico (Lajas, San Germán, and Peñuelas) between October and December, but no large outbreaks were recognized in these communities. No new cases of dengue have been confirmed so far in 1971, but active surveillance is continuing.

The first reported case of dengue in Puerto Rico occurred in 1915 (1), and dengue-like illness was reported again in 1918 and 1945 (2,3). The first confirmed cases in the island were reported in 1963 when strains of dengue type 3 virus were isolated from Puerto Ricans in an epidemic that swept the Caribbean (4). Another epidemic occurred throughout the Caribbean in 1968-69, and 16,348 cases were reported from Puerto Rico in 1969. Strains of dengue type 2 virus were isolated from patients in this epidemic. The South Region was least affected, with a reported attack rate of only 89 cases per 100,000 population, while the attack rates in the other four regions ranged from 167 per 100,000 in the Northeast, to 1,873 in the North.

Four of the five towns with confirmed dengue in 1970, Peñuelas, Guayanilla, Lajas, and San Germán, are in the South Region. The fifth town, Aguada, had most of its cases in two isolated barrios that had escaped the epidemic in 1969. Thus, all of the confirmed cases of dengue in 1970 occurred in areas that were minimally affected by the 1969 dengue type 2 epidemic.

Although a few clinically diagnosed cases were reported between the 1963 and 1969 epidemics, this is the first report of serologically confirmed cases with a virus isolation from Puerto Rico in a post-epidemic period.

(Reported by Rafael Correa Coronas, M.D., Auxiliary Secretary of Health for Preventive Medicine Services, Department

of Health, San Juan, Puerto Rico; the Arbovirus Unit, Virology Section, Laboratory Division, CDC; and an EIS Officer.)

#### References:

- King WW: The epidemic of dengue in Puerto Rico, 1915. New Orleans Med Surg J 69:564-571, 1916-1917
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- Russell PK, Buescher EL, McCown JM, Ordonez J: Recovery of dengue viruses from patients during epidemics in Puerto Rico and East Pakistan. Amer J Trop Med 15:573-579, 1966

#### FATAL MALARIA - Texas

On Nov. 4, 1970, a 72-year-old woman from Dallas, Texas, returned home after a 5-week camera safari in South and East Africa. The next day, she experienced myalgia, malaise, and nausea, followed by fever and progressive weakness. She was seen by a physician who diagnosed a respiratory illness and treated her with antibiotics. Her symptoms persisted, however, and on November 10, she had a shaking chill.

On November 11, the patient was admitted to a local hospital, febrile and acutely ill. Blood sugar and electrolytes were normal, SGOT was 44 units, BUN 49 mg percent, total bilirubin 3.2 mg percent. A chest X-ray showed mild cardiomegaly. The initial diagnosis was fever of undetermined etiology, and the patient received an antiemetic and analgesics. On November 12, she was afebrile, but when her temperature spiked to 105° F. the next morning, accompanied by a shaking chill, she became comatose. At that time, *Plasmodium falciparum* parasites were seen on a peripheral blood smear. She was treated with quinine hydrochloride, followed by chloroquine phosphate, pyrimethamine, and sulfadiazine. She subsequently experienced hypotension, jaundice, thrombocytopenia, hematemesis, and cyanosis. Consumptive coagu-

lation defect was suspected, and she was treated with dexamethasone, anticoagulants, digitalis, and blood transfusions. Her condition continued to deteriorate, however, and she died on November 14. A review of the peripheral blood smears obtained on admission showed *P. falciparum* trophozoites.

Postmortem examination revealed a swollen brain with moderate uncal herniation. Microscopic examination of the brain showed multiple focal hemorrhages and congested blood vessels which were filled with numerous parasitized red blood cells. There were heavy pigment deposits in the liver and spleen, and the lungs had moderate pulmonary edema.

(Reported by George T. DeVaney, M.D., attending physician, Van Q. Telford, M.D., Pathologist, Presbyterian Hospital, Dallas, Texas; David N. Gilbert, M.D., Fellow in Infectious Disease, Department of Internal Medicine, University of Texas Southwestern Medical School; Hal J. Dewlett, M.D., Director of City of Dallas Public Health Department; R. F. Sowell, Jr., M.D., Medical Consultant, and M. S. Dickerson, M.D., Chief, Communicable Disease Services, Texas State Department of Health.)

### SHIGA DYSENTERY - California

On Aug. 7, 1970, a 1½-year-old girl from Los Angeles, California, became ill with fever and convulsions. The next day, she had diarrhea and severe abdominal cramps. On August 11, her stools were noted to be "bloody and slimy," and she was hospitalized. Cultures of stool specimens yielded Shigella dysenteriae type 1. The patient recovered uneventfully after treatment with ampicillin and intravenous fluids. While she was in the hospital, her brother also became ill with diarrhea, fever, and cramps, but his symptoms cleared within 24 hours without treatment.

The patient had never been outside of the United States. Her father works in San Diego, and his job includes cleaning toilets. He makes frequent trips to Tijuana, Mexico, and visits the family only on weekends. He had several attacks of diarrhea before his daughter became ill. The patient's baby-sitter had also been to Mexico, but this was 2 months before the patient's illness.

(Reported by Karl A. Western, M.D., Resident Supervisor, Communicable Disease Unit, Los Angeles County Hospital;

Robert Murray, Epidemiologic Analyst, Ichiro Kamei, M.D., Chief of Communicable Diseases, Los Angeles County Health Department; and an EIS Officer.)

# **Editorial Note:**

This is the second case of indigenous acquisition of Shiga dysentery attributable to the Middle American epidemic. The first was in a 14-year-old girl from New Mexico (MMWR, Vol. 19, No. 38). This is also the second case in which Tijuana was thought to be the source of infection.

This case illustrates the bi-phasic nature of Shiga dysentery. The illness often begins with fever, abdominal pain, and non-bloody diarrhea and may progress to true dysentery characterized by the absence of fever and frequent bloody-mucopurulent stools of small quantity with tenesmus. Ampicillin has proven quite effective in most cases, while tetracycline and chloramphenicol have been ineffective. Without appropriate treatment, the disease can be prolonged and debilitating.

# Morbidity and Mortality Weekly Report

# TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

# FOR WEEKS ENDED

March 6, 1971 and March 7, 1970 (9th Week)

Total Control of the Party of t	ASEPTIC MENIN- GITIS	BRUCEL-	DIPH-	E	NCEPHALITI	S		HEPATITIS			
AREA		LOSIS	THERIA		including cases	Post In- fectious	Serum	Infectious		MALARIA	
	1971	1971	1971	1971	1970	1971	1971	1971	1970	1971	Cum. 1971
UNITED STATES	63	2	6	19	21	5	152	1,228	1,237	39	634
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New Hampshire				_				9	3	-	1
Vermont.			16-	_	100			2	15	H = 1	1
Massachusetts	1	- 7		_	2		- <del>-</del> 1	10 26	1 40	/ <u>=</u>	1 13
Rhode Island.		-	_	_	ī	-	ż	19	14	2	3
Connecticut	-	_	-	1	_	1 1	5	18	8		2
MIDDLE ATLANTIC	8										
New York City	3	_	E - 1	2	3 2	MTZ-T	72 46	217 83	242 73	4	68
New York, Up-State	1 1021	_		1			10	28	37	2	1 4
New Jersey. *	5			1	1		11	43	51	_	14
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Illinois	1	-	- n- n- n	77 /7 1 H H	4	- 1 <b>-</b> 1		23	40	200 -	6
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Delaware	and the	4 - AT		1	- <u>I</u>			1	3	-	J
Maryland	-	_	-	1	-		5	30	9	1	20
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Virginia	100	1.539	0-1	2	2	1	1	30	13		8
West Virginia	L 30 - 1	-	-	-		-	_	7	8	-	1
North Carolina	1	_	-			-	7	16	23	_	30
South Carolina.	2	-	-		-	- u	-10	5	10	i iranial	4
Georgia	ed martin		IN T	-	_	THE	_	11	36	and the second	
Florida	4		-	10	1 7	2	-	53	46	5	14
EAST SOUTH CENTRAL	28	-	1	3	_	-	4	83	81	2	90
Kentucky	2		_	1	_	_	-	42	37	11.	78
Tennessee	16			1	_	-	4	24	24	-	Tirre -
Alabama*	10	-	1	1	-			14	10	2	1:
Mississippi	-	-	-	-	-	-	-	3	10	-	-
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Alaska		14 - TH	A THE		, una	435-46	41100	6	3		1:
Hawaii								0	3		L 13
Puerto Rico*	2		WE T	-	=	DVESTI-	1	14	24		

\*Delayed reports: Aseptic meningitis: Okla. 1
Encephalitis, primary: N.J. delete 1 (1970), Okla. 1 (1970)
Hepatitis, serum: N.J. delete 1
Hepatitis, infectious: N.J. delete 7, Ohio delete 3, Va. 1, Ala. 1, La. delete 1,
Okla. 3 (1970) 4 (1971), P.R. 3 (1970)
Malaria: Minn. 2, Iowa 2, Okla. 3

# Morbidity and Mortality Weekly Report

# TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES

# FOR WEEKS ENDED

March 6, 1971 and March 7, 1970 (9th Week) - Continued

II SHMI	MEA	SLES (Rube	ola)	MENINGO	COCCAL INFE TOTAL	CTIONS,	MU	MPS	POLIOMYELITIS			
AREA		Cumula	ative		Cumulative			Cum.	Total	Paralytic		
	1971	1971	1970	1971	1971	1970	1971	1971	1971	1971	Cum. 1971	
UNITED STATES	2,048	14,350	9,011	76	535	621	4,229	29,787	34		2	
EW ENGLAND	91	457	124	3	29	29	154	1,989				
Maine*	36	256			5		9	365	_			
New Hampshire	-	16	9	_	ĭ	3	8	199				
	_	'š	í	_	<u> </u>	- 3	0	195				
Vermont*	41	141	76	2	12	10	34	497	_			
Rhode Island		8	12	_	2	3	31	500				
Connecticut.	14	33	26	1	9	10	72	428		= -		
IDDLE ATLANTIC	272	1,617	1,408	= 5	66	99	249	2,207	. 4	_		
New York City	113	953	198	_	11	26	26	321	_	_	-	
New York, Up-State	12	171	- 56	- 2	22	20	NN	NN		_	_	
New Jersey.*	12	91	647	_	13	28	98	685	_		_	
Pennsylvania	135	402	507	- 3	20	25	125	1,201	_			
AST NORTH CENTRAL	478	2,681	2,166	13	56	83	1,847	11,751				
Ohio*	85	1,106	676	5	21	42	252	2,175	-			
Indiana	103	148	94	_	4	8	324	1,625	1 1	_		
Illinois	173	771	1,075	5	14	16	195	1,060	= =	_		
Michigan.	46	175	169	- 3	14	15	578	2,977		_		
Wisconsin	71	481	152	= -	3	2	498	3,914	n - I i			
EST NORTH CENTRAL	159	839	1,136	10	54	28	393	1,754		M-11-		
Minnesota	9	30	4	- 1	8	4	107	318		_		
Iowa	78	272	24	<u> </u>	2	- 3	255	1,014			_	
Missouri	44	368	187	8	21	21	12	92		_		
North Dakota	17	56	45	-	1	2 I	9			_		
South Dakota	9	69	36		3		6	129		_		
	_	8	801	1	5		4	91				
Nebraska*	2	36	39	=	14	_	- 4	20 90		-		
	156			13	70	120	272	}				
OUTH ATLANTIC	_	1,633	1,230	- 13		138	272	2,216	_	n =2121	-	
Delaware	2					2	2	46	-	_	-	
Maryland	4	22	198 238	2	9	11	16	244	-		_	
Dist. of Columbia	29	591	232	3	7 1	1	3	41	_	_	_	
Virginia.	18	92	56	3	2	8	111	293	-	20 TO 102	_	
West Virginia*	65	483	151	1 E	11	29	NN	643 NN	_ I S	U C 473		
North Carolina	21	204	59	2	6	- 6	41	244				
		19	2	3	9	24	41				_	
Georgia	16	211	198	3	25	56	69	704	- I			
	194											
AST SOUTH CENTRAL		2,472	118	6	37	38	267	2,445	-			
Kentucky	71	1,037	68	1	8	12	63	869	-	_	-	
Tennessee.	29 81	207 478	, 25 12	3	15	18	159	1,184	-		_	
Alabama	13	750	13	i	5	5	42	358 34				
	513	3,487	1,991	4	45	102	319	2,001				
EST SOUTH CENTRAL	6	3,467	11	-	1 1	102	319			3.00	1	
Arkansas	-	392	' 8		1			16				
Louisiana.*	43	401	61	1	16	24 8	12	13 57	-	-	-	
Oklahoma	464	2,662		3	23	61				111		
Texas		1 14	1,911				307	1,915	7	- 1-	1	
OUNTAIN	83	489	371	1	16	7	219	1,221				
Montana. *	18	120	9	-		-	16	172		_	_	
Idaho	6	65	5		-	-	6	89	_	_	_	
Wyoming	2	7	F -			- 1	-11	47	_	-	115	
Colorado	29	103	9		4	- 3	36	305	_	-	Less-	
New Mexico	21	110	62	-	- 1	_	36	157			_	
Arizona	5	60	278	_	6	- 2	116	395	_	_	_	
Utah	2	24	4	1	5	2	9	56	-	_	_	
Nevada	-		4	/II 1	ĭ			-	=		111-	
ACIFIC	102	675	467	21	162	97	509	4,203			1	
Washington.	23	176		1		14						
Oregon	23	66	35 70	1 - 1	12	8	220 55	2,134	<u> </u>		1	
California.	77	413	340	19	142	74	196	1,390				
Alaska.	- '-	7,3	1	F F 2	.72	72	130	29				
Hawaii.	_	13	21	log I	2	1	38	222	- I			
	3											
Puerto Rico	3	41	471 3	_	- 1	2	23	167	=	-	-	

<sup>\*</sup>Delayed reports: Measles: Me. 6, Mass. delete 5, N.J. add 1 (1970) delete 1 (1971),
Ohio delete 1, W. Va. delete 6, La. delete 2
Meningococcal infections: Ala. 1
Mumps: Me. 3, Nebr. 1, Mont. 66

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# TABLE III. CASES OF SPECIFIED NOTIFIABLE DISEASES: UNITED STATES FOR WEEKS ENDED

March 6, 1971 and March 7,1970 (9th Week) - Continued

AREA	RUBE	LLA	TETAN	ius .	TULARE	MIA	TYPHO FEVI		TYPHUS TICK- (Rky. Mt.	BORNE		RABIES IN ANIMALS	
Alua	1971	Cum. 1971	1971	Cum. 1971	1971	Cum. 1971	1971	Cum. 1971	1971	Cum. 1971	1971	Cum. 1971	
UNITED STATES	1,529	8,576	2	10	1	19	7	48	_	3	75	654	
NEW ENGLAND	53	313	_		_		_	1		_	5	35	
Maine	9	78	1	_	_		_				5	30	
New Hampshire	_	4	- 1	_	_	_	_	_				30	
Vermont	2	8	- 1	_	_	_	_	_				5	
Massachusetts	32	152		_	_	_	_	1				10	
Rhode Island	4	21		_	_		_	-	7=	-20	_		
Connecticut	6	50	-	-	-	-	V -	<u> </u>	=	-	=	- 3	
MIDDLE ATLANTIC	102	451	2	4	_		1	5	1	-	3	43	
New York City	10	72	2	4	_		_	3	(4)	- 1	_		
New York, Up-State	28	96	-	-			_	1	_	_	3	42	
New Jersey	24	83		- I	-	-	_	_	-	-		10-	
Pennsylvania	40	200	NT -	-	-		1	1	-	- 1	_		
EAST NORTH CENTRAL	288	1,703	uu - I		- 1	1	_	3	-		- 5	46	
Ohio	31	270	_	-	_	1	-	2	-	_	1		
Indiana	62	397	- 1	-	_	-	-	-	-	-	_	4.2	
Illinois	53	247	S10 -11		- 1	-	0 I=I	_	-	-	1	12	
Michigan	79	511	-	-	-		-	1	- 1	-	2	10	
Wisconsin	63	278	m) -	-	_	_	-	1000	_	_	- 1	14	
WEST NORTH CENTRAL	49	425	- 1	1100 -	_	1	2	1111-	_	-	- 8	156	
Minnesota	4	48	TCL -		_		-	-	_	_	-	29	
Iova	38	158	- 1	-	-	_	-	-	-	-	1	5€	
Missouri	3	105	-	- 1	-	1	_	-	1 1-	_	1	32	
North Dakota	-	23		-	-	-	- i	-	_	_	- 5	29	
South Dakota	4	14				-	_	_	1 1 2	_	-	-	
Nebraska. " Kansas	-	60			) I	ΨĪ	_				1	10	
SOUTH ATLANTIC	48	683	_	4		12		13	1	1	12	83	
Delaware	9	22				3		3	[	_			
Maryland Dist. of Columbia		1			_		110			_			
Virginia	4	68			_	5	_	1		_	2	19	
West Virginia.	13	95	ii -i		_		_	2.1			6	4	
North Carolina	Ž	9	and -	- 1	_ i	4	_	1		1	_	- 6	
South Carolina	4	130	-1		1 - 1	_	_	_	_	1 - 1		V 1 1 2	
Georgia.		-		_	_		_	0.1	_	_	2	1:	
Florida	16	355	- c	4	- 1	-	70 -	5	-	-	2	1.	
EAST SOUTH CENTRAL	112	700		2		4	1	5	-	1	11	82	
Kentucky	42	350			-	■ 2	1	2	_		7	4	
Tennessee	65	270	-U	1	11 - 1	2	_	1	-	-	. 1	20	
Alabama	5	39	SII -01	1	- [	-	_	2	-	_	3	1.001	
Mississippi	-	41	-	-	-		-	100-	-	1	_	-	
WEST SOUTH CENTRAL	384	1,253	1		- 10		2	5		1 1	20	129	
Arkansas	2	11		_	-	_	_		_	-		1.	
Louisiana	-	35		-	33 -		1	3	-	-	. 1	62910	
Oklahoma.	1	25	-	- 1	-	_		_	_	1.0	12	66	
Texas	381	1,182	7	-	1501-		0.1-1.	2	_		7	4.5	
MOUNTAIN	26	834	BPK -	_	1	- 1	LTT.	2	_	i			
Montana	4	30	7 I	_	1	- 1		_	_	- 1	_	150	
Idaho	1	15		_		_	_	_	_		_		
Wyoming	-	550	1		<b>—</b> —		-	_	-	-		person -	
Colorado	5	97		-1	3 = -		11.	- III -	1-1		-	Hall.	
New Mexico	4	43	TI	-			1.50	-	-	-			
Arizona	11	83	-11	E -	_		1 1 1 1	2	-	9 II -	-	=====	
Utah Nevada	1	16		<u> </u>	1			_	-	112	77 🖳	100	
	100						_			4			
PACIFIC	467	2,214	157	-1	7.10 -	1.7	3	14		-	11	7	
Washington	45	388	H	W -	_		-	-	257	10.7		3072 3094	
Oregon	38	177	19.	5 -	28	_	_	1-2-5	-	- n		POLICE	
California	373	1,568	141 2		59Y-	12	3	14		1554-	9	5	
Alaska	7 4	23 58		71. 7	_		I I I			112	2	2	
Hawaii.		20						-	+	7 (1.47)			
Puerto Rico		W I		5			- 11			I		1	

<sup>\*</sup>Delayed reports: Rubella: Nebr. 2

Rabies in animals: Alaska 12 (1970) 21 (1971)

Week No.

TABLE IV. DEATHS IN 122 UNITED STATES CITIES FOR WEEK ENDED March 6, 1971

(By place of occurrence and week of filing certificate. Excludes fetal deaths)

	All Causes		Pneumonia	Under		All Ca	uses	Pneumonia	Under
Area	All Ages	65 years and over	and Influenza All Ages	l year All Causes	Area	All Ages	65 years and over	and Influenza All Ages	l year All Causes
NEW ENGLAND:	727	476	60	26	SOUTH ATLANTIC:	1,201	697	63	42
Boston, Mass	211	126	20	6	Atlanta, Ga	125	59	10	10
Bridgeport, Conn	53	4.5	10	1	Baltimore, Md	212	115	8	7
Cambridge, Mass	30	23	8	1	Charlotte, N. C	53	28	_	4
Fall River, Mass	41	26	n ser desti	2	Jacksonville, Fla	76	46	10	6
Hartford, Conn	63	34	5	6	Miami, Fla	128	74	1	1
Lowell, Mass	23 17	14	-	1	Norfolk, Va	55	28	_	2
Lynn, Mass	32	13	3 2	1	Richmond, Va	91	51	9	2
New Bedford, Mass	54	32	2	4	Savannah, Ga	40 101	24 97	5	-
New Haven, Conn	50	30	m 1 1 <u>1</u> 0	2	St. Petersburg, Fla	88	56	6 5	4
Providence, R. I Somerville, Mass	7	2		-	Tampa, Fla	196	90	7	6
Springfield, Mass	49	40	7	-	Washington, D. C Wilmington, Del	36	29	2	1
Waterbury, Conn	34	26	-		willington, beli				
Worcester, Mass	63	41	2	- 2	EAST SOUTH CENTRAL:	722	387	39	31
Transport of the last of the l			444		Birmingham, Ala	105	60	_	4
MIDDLE ATLANTIC:	3,629	2,232	185	135	Chattanooga, Tenn	49	21	7	4
Albany, N. Y	48	25	2	1	Knoxville, Tenn	51	32	7	-
Allentown, Pa	36	28	4	-	Louisville, Ky	149	86	13	5
Buffalo, N. Y	165	100	6	8	Memphis, Tenn	137	75	2	6
Camden, N. J	35	20	2	3	Mobile, Ala	66	29	3	4
Elizabeth, N. J	41	20	-	3	Montgomery, Ala	60	36	7	3
Erie, Pa	44	29	3	3	Nashville, Tenn	105	48		5
Jersey City, N. J	73	64	6	1 1					
Newark, N. J	1 000	34	8	4	WEST SOUTH CENTRAL:	1,278	689	56	58
New York City, N. Y. I-	1,882	1,142	100	73	Austin, Tex	35	14	5	1
Paterson, N. J	54	33	8	-	Baton Rouge, La	60	30	-	2
Philadelphia, Pa	591	369	8	16	Corpus Christi, Tex	43	16	- 7	4
Pittsburgh, Pa	195	111	13	10	Dallas, Tex	186	83	4	13
Reading, Pa	46	27	2	2	El Paso, Tex	54	34	1	8
Rochester, N. Y	132	88	10	3	Fort Worth, Tex	90	51	5	7
Schenectady, N. Y	28 41	19 25	5 2	1 1	Houston, Tex	252	131	7	1
Scranton, Pa	59	40	1	5	Little Rock, Ark	49	26	5 7	3
Syracuse, N. Y	46	23	3		New Orleans, La	161 86	95	177	3
Trenton, N. J	21	16	1	1	Oklahoma City, Okla		54	5	3
Utica, N. Y	26	19			San Antonio, Tex	129 64	78 32	4 9	6 5
Yonkers, N. Y	20	12	-		Shreveport, La	69	45	4	2
EAST NORTH CENTRAL:	2,741	1,589	84	132	Tulsa, Okla	0,5	43		2
Akron, Ohio	71	43		3	MOUNTAIN:	534	328	14	19
Canton, Ohio	36	20	5	4	Albuquerque, N. Mex	49	29	4	2
Chicago, Ill	728	415	21	32	Colorado Springs, Colo.	28	15	i	2
Cincinnati, Ohio	178	116	4	10	Denver, Colo	111	75	2	4
Cleveland, Ohio	197	97	3	17	Ogden, Utah	32	23	2	
Columbus, Ohio	188	107	-	13	Phoenix, Ariz	136	75	_	5
Dayton, Ohio	109	66	2	8	Pueblo, Colo	19	15	2	-
Detroit, Mich	367	186	14	9	Salt Lake City, Utah	76	47	_	6
Evansville, Ind	26	21	1	-	Tucson, Ariz	83	49	3	_
Flint, Mich	56	26		7				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fort Wayne, Ind	55	31	3	8	PACIFIC:	1,647	963	38	73
Gary, Ind	54	30	4	3	Berkeley, Calif	26	17	-	-
Grand Rapids, Mich	54	39	6	2	Fresno, Calif	47	30	3	1
Indianapolis, Ind	153	89	3	6	Glendale, Calif	30	23	1	1
Madison, Wis	40	24	2	1	Honolulu, Hawaii	54	23	1	2
Milwaukee, Wis	118	81	-	-	Long Beach, Calif	100	60	3	3
Peoria, Ill	28	18	-	-	Los Angeles, Calif	540	313	16	22
Rockford, Ill	38	18	2	2	Oakland, Calif	70	36	3	2
South Bend, Ind	122	26	1 6	2	Pasadena, Calif	43	28	1	1
Toledo, Ohio	133	91	6	3	Portland, Oreg	141	87	3	12
Youngstown, Ohio	70	45	2	2	Sacramento, Calif	63	36	1	3
HECT MODEL CENTERS	900	557	40	40	San Diego, Calif	112	57	2	7
WEST NORTH CENTRAL:	72	49	7		San Francisco, Calif	172	99	1	7
Des Moines, Iowa	22	18	3	1 1	San Jose, Calif	127	21	3	10
Duluth, Minn Kansas City, Kans	33	16	4	2	Seattle, Wash	127 46	78		10
Kansas City, Mo	141	100	6	3	Spokane, Wash Tacoma, Wash	40	28 27		2
Lincoln, Nebr	24	17	3		lacona, wash.	-,0	- 21		<del>  2</del>
Minneapolis, Minn	100	61	1	5	Total	13,379	7,918	579	556
Omaha, Nebr	90	58	-	2	13241	13,373	1,7710	3/9	336
St. Louis, Mo	245	138	8	13	Expected Number	13,503	7,915	561	546
St. Paul, Minn	91	53	3	8		13,303	1,313	301	340
Wichita, Kans	82	47	5	6	Cumulative Total				17.6
Ichica, Rans.	·	1	1	ľ	(includes reported corrections for previous weeks)	126,703	74,328	5,369	5,771
		+	+	<del>                                     </del>	<del>                                     </del>	f 1	- N (-	and the section	- 1 1
Las Vegas, Nev.*	19			1 7	*Mortality data are being collected table, however, for statistical reason				
		14	_	1			WILL DE LISTER		

+Delayed Report for Week ended February 27, 197

# INTERNATIONAL NOTES QUARANTINE MEASURES

Changes in the "Supplement – Vaccination Certificate Requirements for International Travel," MMWR. Vol. 19, No. 21

In the present outbreak of cholera *el tor*, the vaccination requirements of countries have frequently been modified according to the evolution of the situation. Most of the require-

ments listed below are provisional, but they complete the information given in Vaccination Certificate Requirements for International Travel.

# Additional Cholera Vaccination Requirements

#### Turkey

And from Iran, Syria, United Arab Republic.\*

Union of Soviet Socialist Republics

And from Ethiopia, Guinea, Israel, Jordan, Iraq, Kenya, Kuwait, Lebanon, Libya, Saudi Arabia, Sudan, Syria, Tunisia, United Arab Republic, United Republic of Tanzania, Upper Volta.\*

United Arab Republic

And from Brunei, Guinea, Hong Kong, Macao, Malaysia.\*

# Venezuela

And from Guinea, Iran, Iraq, United Arab Republic.\* Yemen, Southern

And from Iran, Iraq, Jordan, Lebanon, Syria, Turkey, United Arab Republic, USSR.\*

#### Yugoslavia

And from Guinea, Iran, Iraq, Israel, Jordan, Kuwait, Lebanon, Libya, Saudi Arabia, Syria, Tunisia, Turkey, United Arab Republic.\*

The Morbidity and Mortality Weekly Report, circulation 22,500, is published by the Center for Disease Control, Atlanta, Ga.

Director, Center for Disease Control Director, Epidemiology Program, CDC Editor, MMWR David J. Sencer, M.D. Philip S. Brachman, M.D. Michael B. Gregg, M.D.

The data in this report are provisional, based on weekly telegraphs to CDC by state health departments. The reporting week concludes at close of business on Friday; compiled data on a national basis are officially released to the public on the succeeding Friday.

In addition to the established procedures for reporting morbidity and mortality, the editor welcomes accounts of interesting outbreaks for case investigations of current interest to health officials.

Address all correspondence to

Center for Disease Control Attn: Editor Morbidity and Mortality Weekly Report Atlanta, Georgia 30333

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE PUBLIC HEALTH SERVICE

HEALTH SERVICES AND MENTAL HEALTH ADMINISTRATION CENTER FOR DISEASE CONTROL ATLANTA, GEORGIA 30333

OFFICIAL BUSINESS

